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TAUNTON RURAL DISTRICT



Annual Report

OF THE

Medical Officer of Health

AND

Senior Public Health Inspector

FOR THE YEAR 1965

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TAUNTON RURAL DISTRICT

PUBLIC HEALTH STAFF, 1965

Medical Officer of Health :

HUGH MORRISON, M.B., Ch.B., D.P.H.

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To :

THE CHAIRMAN AND MEMBERS OF THE
TAUNTON RURAL DISTRICT COUNCIL

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for 1965. The report contains the usual information on the health and sanitary circumstances of the district. This has again been divided into two sections, the first referring to the province of the Medical Officer of Health, and the second contributed by the Senior Public Health Inspector. The report, in the main, follows the same lines as that of the previous year, but certain fresh facts have been incorporated in the various sections.

Some points of interest to which attention may be drawn are as follows :—

1. The vital statistics of the year show that there has again been an increase, of 620, in the population of the district. Both the birth rate and the death rate were rather lower than the national average. The infant mortality figure was slightly above the national figure, but still low at 24.3. Deaths from cancer of the lung numbered 12, and all these were males.

2. The table of notified infectious diseases has been simplified and now shows the number of cases of each disease without going into details of their age groups. Measles was prevalent, the numbers being rather higher than in the previous year but so far as is known the incidence of serious complications was not high. The 47 cases of Food Poisoning all occurred during a limited period in the wards of Tone Vale Hospital, and the organism responsible was identified as the salmonella typhimurium which is the commonest causative agent in this country. There were no serious or long-lasting effects

on the patients and the outbreak was brought under control quite quickly. There were 7 new cases of Tuberculosis during the year, as compared with only 1 notification in 1964, but the number of known cases in the district fell from 102 to 89.

3. The section on immunisation has been completely re-written, and it is hoped that the account given of present practice in this field may be of general interest and may be found valuable by parents and others who have responsibilities for the care and upbringing of children.

4. A full statement of the findings of mass radiography in this district has again been included and should be an encouragement to all of us to avail ourselves of this valuable service.

5. Sewerage and sewage disposal was dealt with in considerable detail in the 1964 report, and the account there given, with slight amendments, is repeated this year with the object of keeping this important subject in the public mind.

6. It will be seen from the section on refuse disposal that during 1965 weekly collections of refuse was still only being provided in certain parts of the district, whereas the remaining areas had fortnightly collections. There were, however, prospects that the Council would favour weekly collection for the whole district, and since that time this policy has been decided upon. A scheme was introduced whereby residents in the district could have their bins collected from the back door instead of having to carry them to the roadway provided that they could furnish a certificate from their doctor stating that this was desirable on the grounds of age or infirmity. There proved to be little inclination on the part of those who might have been helped in this way to take advantage of the facility offered.

Once again I wish to thank the Members of the Council, the Clerk and Officials of the other Departments, and the Staff of the Public Health Department for their willing assistance and co-operation.

I am,

Your obedient Servant,

HUGH MORRISON.

TAUNTON RURAL DISTRICT

Statistics of the Area for the Year 1965

Area (in acres)	...	...	...	...	...	70,528
Estimate of resident population, mid-year 1965	...					24,380
No. of inhabited houses according to the Rate Book on 1st April, 1965	...	...	...	...	...	7,249
Rateable Value 1st April, 1965	...	...	...			£654,850
Sum represented by a 1d. Rate, year 1965-66	...					£2,800 0 0

Physical Features and Social Conditions

Taunton Rural District lies in the south-western region of Somerset, surrounding Taunton Borough, the County Town. It is roughly triangular in shape, with Taunton Borough situated near the middle of the triangle. The boundary of the district is formed on the north by the Rural Districts of Williton and Bridgwater; on the east and south-east by the Rural Districts of Langport and Chard; on the south by the County of Devon; on the south-west and west by the Rural District of Wellington.

There is considerable variation in the type of country found in different parts of the district: in the north and north-west there is high ground forming portions of the Quantock and Brendon Hills; in the south the land rises to the hill parish of Churchstanton lying in the Blackdowns; between these regions lies the fertile valley of Taunton Deane, with the ground falling towards the east to the flat moors and marshy ground surrounding the lower reaches of Tone and Parret. Geologically also, the formations vary. In the north are found chiefly old and new red sandstone; in the south, lower lias and upper greensand; the valley regions have new red marl, new red sandstone and alluvium.

The climate is equable, with an average annual rainfall of 36.6 ins., and an average mean daily temperature of about 41° F. in January and 62° F. in July.

Rich arable and pasture land covers most of the district, but some of the hill regions are in the rough uncultivated state, and the soil on the Blackdown Hills tends to be poor in quality. In the eastern parishes the land is subject to seasonal flooding. Communications are good, and almost all parts of the district are easily accessible by road. Following the Tone valley through the middle of the district runs one of the main lines of the Western Region of British Railways and two branch lines leave it at or near Taunton to run to the north and west.

There are thirty-two parishes with estimated populations varying from 72 to 3,099.

Most of the inhabitants are engaged in some form of agriculture, dairy farming being particularly important. General farming is also largely practised, and allied activities are withy growing and basket-making, fruit farming and cider-making. There is a paper mill in the district which employs a fair number of people, and another source of employment for men is stone-quarrying which is carried out on a considerable scale. A factory producing meat products and a branch factory run by Taunton Shirt Manufacturers, are additional centres of employment in the district. Many of the residents in the rural district travel daily to Taunton to work in factories and other establishments.

There is one large hospital in the district, namely Tone Vale Hospital in the parish of Bishops Lydeard, which, with its patients and resident staff, accounts for a population of about 1,000.

VITAL STATISTICS OF THE YEAR

With reference to the figures which follow, it should be pointed out that the standardisation of the rate for births and deaths allows for the differing age and sex distribution of the populations in different areas, and is obtained by multiplying the crude rate by a comparability factor for the district furnished by the Registrar General. This enables comparison to be made with the figures for the country as a whole, or with those for other districts.

1. Births.

(a) Live Births.

	M.	F.	Total	} Crude birth rate per 1,000 of the estimated resi- dent population 15.09
Legitimate	168	174	342	
Illegitimate	10	16	26	
Totals	178	190	368	
} Standardised Birth Rate, Taunton R.D. 16.59				
} Birth Rate, England and Wales 18.0				

(b) Still Births.

Total...	...	...	...	2
{ Rate per 1,000 (live and still) births—				
{ Taunton R.D. 5.4				
{ England and Wales 15.7				
{ Rate per 1,000 estimated resident population—				
{ Taunton R.D. 0.08				

2. Deaths.

(a) Total Deaths	...	...	...	...	...	336
Crude Rate per 1,000 estimated resident population						13.7
{ Standardised Death Rate, Taunton R.D.	...	...	...	...	...	9.7
{ Death Rate for England and Wales	11.5

(b) Maternal Mortality.

Total maternal deaths from all causes	0
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(c) Infant Mortality.

Deaths of infants under 1 year of age—

Total	9
Deaths among legitimate infants	8
„ illegitimate „	...	...	...	...	1
{ Death Rate per 1,000 total (live and still) births—					
Taunton R.D.	...	...	...	...	24.3
England and Wales	...	...	...	...	19.0

(d) Deaths from Cancer (all ages)—

Total 53

Infant Mortality during 1965

Cause of Death	Under 1 week	1 to 4 weeks	1 to 6 months	6 to 12 months	Total under 1 year
Pneumonia	—	—	—	1	1
Cerebral Haemorrhage	1	—	—	—	1
Hydrocephalus	1	1	—	—	2
Collapse of lungs	1	—	—	—	1
Prematurity	2	—	—	—	2
Asphyxia	1	—	—	—	1
Emphysema	1	—	—	—	1

Causes of death during 1965

	M.	F.	Total.
Tuberculosis, respiratory	1	—	1
Tuberculosis, other	—	—	—
Syphilitic disease	—	—	—
Diphtheria	—	—	—
Whooping cough	—	—	—
Meningococcal Infections	—	—	—
Acute Poliomyelitis	—	—	—
Measles	—	—	—
Other infective and parasitic diseases	1	—	1
Malignant neoplasm, stomach	5	3	8
Malignant neoplasm, lung, bronchus	12	—	12
Malignant neoplasm, breast	—	7	7
Malignant neoplasm, uterus	—	1	1
Other malignant and lymphatic neoplasms	14	11	25
Leukæmia, aleukæmia	—	1	1
Diabetes	1	—	1
Vascular lesions of nervous system	12	28	40
Coronary disease, angina	37	20	57
Hypertension with heart disease	7	8	15
Other heart disease	12	49	61
Other circulatory disease	13	10	23
Influenza	—	1	1
Pneumonia	7	12	19
Bronchitis	8	8	16
Other disease of respiratory system	3	1	4
Ulcer of stomach and duodenum	—	1	1
Gastritis, enteritis and diarrhœa	—	—	—
Nephritis and nephrosis	—	—	—
Hyperplasia of prostate	—	—	2
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	5	—	5
Other defined and ill-defined diseases	11	12	23
Motor vehicle accidents	3	4	7
All other accidents	2	2	4
Suicide	2	1	3
Homicide and operations of war	—	—	—
All Causes—Total	156	180	336

GENERAL PROVISION of HEALTH SERVICES FOR THE AREA

Domiciliary Services

(1) Medical and Nursing

There are seven general medical practitioners living and carrying on the main part of their practice in different areas of the district. In addition to this, most of the Taunton Borough practitioners have some rural district residents on their lists, and there is also, as would be expected, some overlap from the surrounding rural districts in the provision of medical attention. There are adequate arrangements for domiciliary consultation, when required, with consultants serving the Taunton area, and speaking generally, the practice of medicine in the district is of a high standard. The provisions for domiciliary nursing are also satisfactory.

(2) Home Help Service

This service, administered by the Somerset County Council, is now well established in the district, and invaluable assistance is given in many cases of illness and the domestic difficulties arising therefrom. There is no doubt that this is one of the most useful of all public services. I am indebted to the County Organiser for the following analysis of cases where help was arranged in Taunton Rural District during 1965.

Maternity	...	...	...	...	...	15
Old age	...	...	...	...	...	55
Chronic sick	...	...	...	...	...	20
Post Operation	...	...	...	...	...	9
Mentally Ill	...	...	...	...	...	4
Post and Pre-Natal	...	...	...	...	...	3
Care of children	...	...	...	...	...	2
Accidents and general illness	...	...	...	...	...	3
Total						111

(3) Meals on Wheels.

The Womens Voluntary Service operates a scheme for supplying meals to old people in the Rural District. The usual thing is to provide a hot meal at mid-day on two days of each week to individual old people. During 1965 an average of 36 meals per week were provided to old people in the parishes of Bishops

Lydeard, Ash Priors, Halse, Cheddon Fitzpaine, Cothelstone, Bishops Hull, Norton Fitzwarren, Kingston St. Mary, West Monkton, Creech St. Michael and Ruishton. The present arrangements involve two separate rounds on two days of the week. It is found that eight or nine cases are required in any particular district to make one of these rounds a practical proposition. The names of those requiring the service are provided by doctors, district nurses and home helps, and those patients requiring special diets as in diabetes can be catered for. It is hoped to extend this service progressively in the rural district provided that sufficient helpers are available. The work of distributing these meals is done by members of the W.V.S. and one would wish to express gratitude for this service which provides an outstanding social benefit to the community.

Hospital Services

The Hospital Services of the district are administered by the Taunton Hospital Management Committee, under the general direction of the S.W. Regional Hospital Board. A detailed re-appraisal of these services is going on at the present time following on the production by the government of a comprehensive Hospital Plan for the nation. Some of the provisions for the needs of various types of patient are detailed below :—

(1) General Medical and Surgical

The Taunton and Somerset Hospital together with Musgrove Park Hospital, which is also situated in the Borough of Taunton, and which is probably eventually destined to supersede the first-named establishment, cater for most medical and surgical conditions. Musgrove Park Hospital takes most of the adult cases, and also has a comprehensive Pædiatric Department. The Taunton and Somerset Hospital is in the meantime dealing with Orthopædics and Ophthalmology. It also houses the Casualty Department for the area. Both hospitals have out-patient facilities in addition to in-patient beds. Certain cases requiring special investigation or treatment such as neurosurgery or radiotherapy are referred to Bristol Hospitals for this purpose.

(2) Infectious Diseases

Cases of infectious diseases from Taunton Rural District are sent to the Taunton Isolation Hospital situated in the Borough of Taunton. The bulk of the Isolation Hospital work is done in cubicle blocks. The pattern of infectious disease requiring admission to hospital is certainly changing. Many of the patients admitted

suffer from vague pyrexial illnesses in which the diagnosis is in doubt. Scarlet Fever which used to provide a large proportion of the admissions is, at the present time, a relatively mild disease and most of the cases are nursed at home. Measles and Whooping Cough still demand hospital treatment in the occasional case where there are severe complications or where home nursing is impracticable. Diphtheria has not been seen in the district for many years. Poliomyelitis is being brought under control by inoculation, and in the past few years there has not been a severe epidemic in this part of the country. Many cases are, however, admitted to hospital on suspicion of suffering from poliomyelitis, and these often provide difficult diagnostic problems. The extensive use of antibiotics has resulted in the appearance of severe infections due to certain bacteria which were formerly regarded as fairly harmless, and this leads to the admission of cases of this kind to the Isolation Hospital. Thus, although the type of illness dealt with changes over the years, the total number of cases requiring isolation treatment has rather tended to increase than to diminish.

(3) Tuberculosis

Cases of pulmonary and non-pulmonary Tuberculosis come under the Regional Hospital Board for treatment, which is supervised by the Chest Physicians for the area. The Sanatoria are at Wincanton and Taunton for pulmonary cases. Cases requiring orthopaedic treatment are becoming very uncommon, but when they do occur, arrangements for treatment are made according to the individual need.

(4) Poliomyelitis

Suspected cases are sent for diagnosis to the Taunton Isolation Hospital. If the condition is confirmed they are seen by Regional Specialists who arrange for continuation treatment either as out-patients or as in-patients at Bath Orthopaedic Hospital.

(5) Chronic Sick

Since the appointment of a Geriatrician to the West Somerset Clinical Area, arrangements for hospital treatment of the chronic sick have been put on a more satisfactory basis. Most of the cases are admitted to Trinity Hospital in Taunton which is having many internal improvements carried out in order to raise it to the highest modern standards. There continues to be a very great pressure on accommodation of this type, and this is a branch of medical care which will undoubtedly make increasing demands on medical and ancillary services as the years go on.

It was not found necessary during the year to invoke powers under the National Assistance Act, 1948, Sec. 47, for the compulsory removal to an Institution of persons in need of proper care and attention.

(6) Mentally Sick

Cases are admitted to the Mental Hospital at Tone Vale, near Taunton. The psychiatric specialists conduct out-patients' clinics for the area, and it is felt that now, more than ever before, mental patients are having the benefit of treatment at an earlier and more hopeful stage of the disease.

Mentally defective cases are well provided for at Sandhill Park Hospital which is situated in Taunton Rural District.

(7) Mass Radiography.

Regular sessions are held by the Regional Hospital Board Unit on one afternoon of each fortnight at the old Gas Works site in the Borough of Taunton. Residents in the Rural District who wish to have a chest X-ray are welcomed at any of these sessions and it is strongly urged that this facility should be freely used, especially by those over the age of 40 who would do well to have an annual chest X-ray.

As an example of the type of work done in a unit of this sort the following table shows the findings obtained from routine examinations at the Taunton centre during 1965.

	Male	Female	Total
Number examined	577	665	1,242
Abnormalities detected	19	10	29
Details of abnormalities detected—			
Tuberculosis—Healed	4	6	10
Acquired Cardiac Lesion	3	1	4
Bacterial and Virus Infections of the Lungs	5	1	6
Emphysema and Bronchitis	4	—	4
Goitre	—	1	1
Localised Fibrosis	1	—	1
Sarcoidosis	1	1	2
No Diagnosis received	1	—	1
	19	10	29

In addition, a number of surveys were carried out on the premises of various local industries. The findings obtained are shown in the following table :—

	Male	Female	Total
Number examined	525	631	1,156
Abnormalities detected	15	13	28
Details of abnormalities detected—			
Pulmonary Tuberculosis—Active	1	—	1
Pulmonary Tuberculosis—Healed	5	2	7
Abnormality of Diaphragm	1	3	4
Acquired Cardiac Lesion	4	4	8
Bacterial and Virus Infections of the Lungs	—	1	1
Bronchitis	—	2	2
Chronic Bronchitis	—	1	1
Benign Tumors	1	—	1
Bronchiectasis	2	—	2
Pulmonary Fibrosis	1	—	1
	15	13	28

Clinics and Treatment Centres

(1) Tuberculosis

Clinics for patients suffering from this disease, and for the supervision of suspects and contacts, are held by the Chest Physicians at Musgrove Park Hospital. There is an After-Care Committee working in co-operation with these clinics. Mass radiography has been carried out from time to time on various groups of the County population, by a team working from a centre in Bristol, but this service has not been called upon to deal with residents in the Taunton Rural District.

(2) Venereal Disease

A combined Clinic and Treatment Centre is carried on at the Taunton and Somerset Hospital which caters for male and female patients of this and surrounding districts. Early cases of syphilis are usually sent to Frenchay Hospital, Bristol, for a fortnight's intensive penicillin treatment as in-patients. Afterwards they continue to have observation and treatment at the Taunton Clinic. These conditions which had, for some years, become rather uncommon in the district have been latterly showing a marked increase in prevalence; and this is in accordance with experience over the country as a whole.

(3) Maternity and Child Welfare

The Maternity and Child Welfare Acts are administered by the County Council, under whose supervision are also the Health Visitors and Midwives practising within the area. There is an excellent Maternity Home in the Urban District of Wellington at which some of the mothers from Taunton Rural District are confined. Obstetric Consultants in Taunton are available for consultation with Medical Practitioners in the District. Abnormal and complicated cases can be admitted for hospital treatment when necessary. Every case of Puerperal Pyrexia and Maternal Mortality is investigated by the Medical Staff of the County Council. A valuable service is now provided for premature infants. Small or premature babies unsuitable for nursing at home are admitted to a Special Care Unit at Musgrove Park Hospital, an ambulance equipped with an Oxygenaire incubator being sent to collect them from their homes. If the baby is deemed fit to be nursed at home, the district midwife can obtain advice and special equipment to help her with the management of the case.

Laboratory Facilities

The Public Health Laboratory Service has a Laboratory in Taunton which undertakes the bacteriological examination of swabs, blood, faeces and sputum, etc. This service is available also to the Doctors practising in the District. Bacteriological and chemical analyses are also undertaken for the examination of milk, foods, water supplies and sewage effluents, etc. The co-operation and assistance of the Public Health Laboratory Staff in investigating all types of bacteriological and epidemiological problems is of the greatest value.

Ambulance Facilities

Ambulance transport for all cases is the responsibility of the Somerset County Council. The main Ambulance Station and Control for the south-west of the County is situated at the entrance to Musgrove Park Hospital. The Ambulance Station serves a very wide area and at 31st December the establishment of vehicles and staff was as follows—

Vehicles	...	7 Ambulances
		6 Sitting-case Ambulances
		1 Car
Staff	...	5 Sub-officers
		24 Driver-attendants

All vehicles at this Station are fitted with radio.

PREVALENCE AND CONTROL OF
INFECTIOUS DISEASES

Acute Infectious Diseases

The following table gives the number of notifications received for various notifiable diseases.

INFECTIOUS DISEASES, 1965

Disease					Number of cases notified
Measles	...	...	...	...	177
Scarlet Fever	...	...	...	...	16
Erysipelas	...	...	...	...	4
Food Poisoning	...	...	...	...	47
Malaria	...	...	...	...	1
Dysentery	...	...	...	...	5
Puerperal Pyrexia	...	...	...	...	1
Whooping Cough	...	...	...	...	7
Tuberculosis—Respiratory	...	...	...	...	7
Non-respiratory	...	...	...	...	1

Tuberculosis

					Pulmonary	Non-pulmonary
Cases on the Register at 31.12.65					72	17
New cases during 1965	...	...			7	1
Transfers from other districts	...				1	—
Deaths	...	...	...	...	1	—

IMMUNISATION

The protection against various infectious diseases which can now be given by immunisation is one of the most important of public health benefits, and has contributed largely to the decline in prevalence of these conditions and to the very great reduction in the number of deaths which they now cause. The actual procedure of immunisation is carried out either by the family doctor or at child welfare clinics and schools, and records of the immunisation of individual children residing in the borough are kept by the health department. It is hoped that very soon the recording side of the matter will be handled entirely by computer, with a resulting reduction in clerical work and an increased simplicity and certainty in ensuring that each child is called for the required injection at the

correct time. The percentage of children immunised in this part of Somerset is on the whole satisfactory, and compares favourably with other areas, but this is a subject which requires to be constantly kept in the public mind, because with the present low prevalence of infectious diseases, their potential danger to health and life is all too easily forgotten.

The following table sets out the complete schedule of immunisation which is considered desirable for children at the present time :—

Age	Immunisation Procedure
1—6 months	1. Diphtheria, Whooping Cough, Tetanus (combined injection), Poliomyelitis vaccine (by mouth) 4—6 weeks interval 2. Diphtheria, Whooping Cough, Tetanus (combined injection), Poliomyelitis vaccine (by mouth) 4—6 weeks interval 3. Diphtheria, Whooping Cough, Tetanus (combined injection), Poliomyelitis vaccine (by mouth)
During 2nd year of life	4. Smallpox Vaccination
18—21 months	5. Diphtheria, Whooping Cough, Tetanus (combined injection), Poliomyelitis vaccine (by mouth)
At school entry	6. Diphtheria, Tetanus (combined injection) Poliomyelitis vaccine (by mouth)
8—12 years	7. Diphtheria and Tetanus (re-inforcing combined injection)
12 years	8. B.C.G. Vaccination against T.B.

Details follow of the numbers protected in Taunton at various ages in the year 1965, with brief notes referring to each of the diseases concerned :

Diphtheria.

Immunisation against diphtheria was the first mass campaign of protection against an infectious disease carried out in this country, apart from vaccination against smallpox which has never been applied to such a wide extent. The result is that, whereas there used to be thousands of deaths from diphtheria each year in England and Wales, the mortality is now almost down to vanishing point. It is necessary for the percentage of protected children in the community to be kept high in order to avoid the recurrence of outbreaks.

Numbers Immunised :—

			Primary courses	Re-inforcing Injections
Under 4 years	...	...	263	71
4—7 years	...	...	19	231
8—16 years	...	...	18	133
Totals	...	...	<u>300</u>	<u>435</u>

Whooping Cough.

This is now probably the most generally disabling of the common infectious diseases affecting young children. There are risks to life, especially in infants, and lung complications can be severe and prolonged. Immunisation is preventive in a good proportion of cases and in the remainder modifies the disease to produce a mild attack.

Numbers Immunised :—

			Primary courses	Re-inforcing Injections
Under 4 years	...	...	263	71
4—7 years	...	...	7	55
8—16 years	...	...	1	4
Totals	...	...	<u>271</u>	<u>130</u>

Tetanus.

This is an uncommon infection in this country but important because of its very severe character and the high rate of mortality in those affected. It is much commoner in some of the less developed parts of the world, and even in Europe at least 26,000 have died from this cause in the past ten years. Immunisation gives the practical certainty of complete protection.

Numbers Immunised :—

			Primary courses	Re-inforcing Injections
Under 4 years	...	...	263	71
4—7 years	...	...	33	228
8—16 years	...	...	104	99
			<hr/>	<hr/>
Totals	...	...	400	398
			<hr/>	<hr/>

Poliomyelitis.

It is hardly necessary to stress the misery which can result from this disease in view of the widespread epidemics which have occurred in this country within recent memory. Many of the sufferers die, and others are left with a lifetime of disablement. Immunisation is now simple with the use of vaccine given by mouth and has been largely responsible for the virtual elimination of poliomyelitis as a serious epidemic risk in this country at the present time. Here again it is essential that a high proportion of children continue to be immunised in order to avoid the danger of further outbreaks.

Numbers Immunised :—

			Primary courses	Re-inforcing Injections
Under 4 years	...	...	293	1
4—7 years	...	...	43	216
8—16 years	...	...	7	43
			<hr/>	<hr/>
Totals	...	...	343	260
			<hr/>	<hr/>

Smallpox.

Smallpox is one of the most deadly of all infectious diseases. Its incidence in this country has been confined in latter years to scattered outbreaks, but the dangers of large-scale epidemics are increasing owing to the ease and rapidity of air transport from countries where the disease is still endemic. Vaccination gives excellent protection, and is best done initially in the second year of life.

Numbers Immunised :—

			Primaries	Re-vaccination
Under 1 year	...	...	23	—
1 year	...	...	109	—
2—4 years	...	...	22	4
5—15 years	...	...	3	16
Totals	...	...	157	20

Tuberculosis.

One of the most dramatic improvements in the state of the national health has been the enormous fall over the period since the last war, in the prevalence of tuberculosis and in the number of deaths which it causes. There are many factors responsible for this gratifying development, and one of them undoubtedly is the beneficial effect of the widespread campaign of immunisation with B.C.G. which has been carried out. The required injection is given at about the age of twelve after preliminary skin testing to determine which children are susceptible to an attack of the disease.

Number of children tested	...	29
Number of children immunised	...	17

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

The water supplies of the district are now under the control of the West Somerset Water Board, of whose area Taunton Rural District forms one portion. The Board's records and statistics are kept in such a way that it is not practicable to produce figures and other details for this district alone as distinct from the Taunton Division which comprises Taunton Borough and Rural District and Wellington Urban and Rural Districts.

The service provided by the Board is proving very satisfactory and it is the experience of this Public Health Department that any complaints which arise and any defects which come to light are given very prompt attention, and matters are quickly set to rights.

During the year 1965 there were no serious shortages and ample supplies were maintained to all consumers in the area. Bacteriological and chemical sampling, which are carried out by the Board's technical staff show that at all times the supply has been safe and satisfactory. Additional checks are made from time to time by this department and these confirm the purity of the supply.

Most of the areas of the district where it is practicable to lay on a piped public supply have now had this facility provided, and work is continuing on minor works to serve more outlying concentrations of dwellings.

Of 269 routine samples of piped water after chlorination taken in the area of the Taunton Division during 1965, 261 were bacteriologically satisfactory. The remaining 8 which showed some contamination were quickly rectified by simple remedial measures.

Sewerage and Sewage Disposal

A survey of drainage provisions in the various parishes of the district has been carried out by the Public Health Department, a preliminary report of this having been made to the Public Health Committee in 1962, and a final report at the beginning of 1965. From the facts disclosed by these reports and the discussions which

took place on the subject, the following summary of the position at the end of 1965 may be given :—

1. Seven parishes had satisfactory sewerage for their main concentrations of properties, with drainage either into small individual sewage works or into the Taunton Borough works at Ham, Creech St. Michael. These parishes were :—

Bishops Hull
Bishops Lydeard
Churchstanton
Creech St. Michael
Norton Fitzwarren
Ruishton
Trull

The only substantial problem with this group concerns the works at Bishops Hull which are overloaded and badly sited in relation to adjacent inhabited properties. Plans are in hand for conveying the sewage from this parish to the works at Norton Fitzwarren.

2. Two parishes had systems whose adequacy was doubtful. These were :—

Combe Florey
Corfe

Combe Florey has a public sewer leading to a settlement tank and the works at Corfe are probably inadequate in size. Conditions in these parishes, however, have not been such as to require urgent attention to these matters.

3. Eight parishes had sewerage schemes in various stages of planning or construction. These were :—

Cheddon Fitzpaine
Hatch Beauchamp
The Henlade portion of Ruishton parish
Kingston St. Mary
North Curry
Stoke St. Gregory
West Bagborough
West Monkton

The two largest projects in this group are the combined scheme for Cheddon Fitzpaine and West Monkton, and the combined scheme for North Curry and Stoke St. Gregory. Both are well advanced in the planning stage and should come into operation within a reasonable time. The Hatch Beauchamp system was completed during the year. The scheme for the Henlade portion of the parish of Ruishton was being undertaken by the Surveying Department of the Council and construction work began in 1965. Provisions for the parishes of Kingston St. Mary and West Bagborough were in the early stages of planning.

4. Five parishes were considered to have sewerage problems of varying degrees of urgency, and it was decided to proceed with them in due course, but no firm plans had been put in hand at this stage because of the heavy drainage programme to which the Council were already committed. These were :—

Ash Priors
Halse
Pitminster
Staplegrove
Stoke St. Mary

Of this group, the parishes of Pitminster and Stoke St. Mary, because of their proximity to the Borough of Taunton and the resulting pressure of housing development, will probably require to be considered for sewerage at an early date. Staplegrove is a somewhat similar case, but here the need may be slightly less pressing. Ash Priors and Halse lie in the more rural portion of the district but each has troublesome drainage problems.

5. Ten parishes were considered not to require sewerage schemes in the meantime. These were :—

Bickenhall
Cothelstone
Curland
Durstun
Lydeard St. Lawrence
Orchard Portman
Staple Fitzpaine
Thornfalcon
Tolland
West Hatch

These parishes have scattered populations. They have no extensive concentrations of human habitations, with the exception perhaps of Lydeard St. Lawrence village and Bishopswood in the parish of Otterford, where small sewerage schemes might at some time be called for. Otherwise there has been no indication from these areas that drainage and sewage disposal is a serious problem. It is in these parishes, and in the more scattered portions of those previously listed, that a cesspool emptying service would be of especial benefit.

Housing

Provision of houses in the District by the Council has gone on steadily throughout the year. 17 were completed in 1965 and since the end of the war 858 have been built. In addition to this, about 1,414 houses have been built by private enterprise during the same period. This building activity has had some effect on the waiting list of families requiring accommodation, but continued efforts in this direction will be required for some time to come. There were about 350 applicants for Council houses on the waiting list at the end of 1965.

The housing needs of old people have been borne in mind, and at the end of 1965, 143 bungalows were owned by the Council, most of these being occupied by people in the older age-groups. Some flats had also been made available for the same purpose.

The Council's building programme was as follows :—

Parish					Number completed during 1965	Number under construction at 31st Dec. 1965
Bishops Hull	...	...	...	...	6	54
Pitminster	...	...	...	...	3	—
Hatch Beauchamp	...	...	...	...	8	—
					<hr/> 17 <hr/>	<hr/> 54 <hr/>

The following table shows the number of houses owned by the Council :—

	Parish				Number of houses	
Bishops Hull	156
Bishops Lydeard	261
Cheddon Fitzpaine	24
Churchstanton	24
Combe Florey	4
Corfe	8
Creech St. Michael	62
Curland	4
Hatch Beauchamp	31
Kingston St. Mary	44
Lydeard St. Lawrence	34
North Curry	63
Norton Fitzwarren	167
Otterford	4
Pitminster	55
Ruishton	60
Staplegrove	6
Stoke St. Gregory	50
Stoke St. Mary	12
Thornfalcon	8
Trull	14
West Bagborough	34
West Hatch	4
West Monkton	127
Total						1,256

The following table refers to properties dealt with under slum clearance procedure :

Action	Houses dealt with during 1965	Total number of houses dealt with since 1.1.55
1. Acquired by Council for demolition (site used for erecting new houses)	—	6
2. Demolition Order made ...	27	88
3. Undertaking given not to use for human habitation	11	109
4. Houses actually demolished ...	—	43
5. Clearance Area Procedure carried out	—	5 (in one terraced block)
6. Closing Order	4	20

The year showed very gratifying progress in the field of Improvement Grants. During the year, 16 Discretionary Grants and 52 Standard Grants were made, bringing the total of Improvement Grants for the District up to the end of 1965 to 536.

CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960

During 1965, 15 site licences were issued in respect of individual caravans.

REPORT OF THE SENIOR PUBLIC HEALTH INSPECTOR

The following is a tabular summary of work carried out during the year 1965 :—

Number and nature of inspections :—

Dwelling houses (Inspections, revisits, etc.)	...	507
Food Hygiene	... ..	195
Slaughterhouses	... ..	2,774
Factories and Workshops	... ..	66
Water Supplies	... ..	93
Drainage nuisances	... ..	362
Refuse collection and disposal	... ..	348
Clean Air Act, 1956	... ..	11
Caravan Sites and Control of Development Act	...	330
Offices, Shops and Railway Premises Act	...	67
Animal Boarding Establishments	... ..	7
Noise abatement	... ..	4
Miscellaneous nuisances	... ..	147

Food Hygiene (General) Regulations, 1960

Visits to food premises in the area have been continued during the year and some progress made in securing improvements.

Water Samples

45 samples of water have been submitted for bacteriological examination during the year. 28 samples have been taken from private supplies, and reported on as follows :—

Satisfactory	...	24
Unsatisfactory	...	4
		—
		28
		—

17 samples from various public supplies have been examined and classified as follows :—

Satisfactory	...	...	13
Unsatisfactory	...	...	4
			—
			17
			—

6 samples taken for chemical examination from public supplies gave satisfactory results.

All the above results have been sent to the persons involved together with suitable advice.

Meat Inspection

Towards the end of the year it was found necessary to urgently consider the need for the appointment of additional staff to cope with the heavy meat inspection duties peculiar to the district. To deal with the immediate problems, i.e., heavy Christmas killing, a local veterinary practitioner was called in to assist on a temporary basis. The Council also considered and agreed to a proposal to set up a special full-time Meat Inspection Branch within the department, and for this purpose authorised the appointment of a further three Meat Inspectors making a total of four in all. Even now, it is still extremely difficult to allocate the inspection force available economically and efficiently between eight slaughterhouses, each having a different killing pattern.

Caravan Sites and Control of Development Act, 1960

Further good progress has been made during the year in obtaining improvements to those sites which only just comply with the Council's Schedule of conditions.

Offices, Shops and Railway Premises Act, 1963

Total number of registered premises at the end of the year 57.
Number of persons employed in registered premises 206.

Ice Cream

The number of retailers of this product in the area is 83. They sell pre-packed ice cream, which is stored in properly constructed refrigerators.

Meat Inspection

Carcases and Offal inspected and condemned in whole or in part

	Cattle excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.	Horses.
Number killed (if known)	1,786	209	5,977	108,516	58,767	0
Number inspected ...	1,786	209	5,977	108,516	58,767	0
All diseases except Tuberculosis and Cysticerci						
Whole carcases condemned ...	2	20	36	884	320	0
Carcases of which some part or organ was condemned ...	245	77	18	6,069	4,892	0
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ...	13.82	46.4	.9	6.4	8.9	0
Tuberculosis only						
Whole carcases condemned ...	0	0	1	0	5	0
Carcases of which some part or organ was condemned ...	0	0	0	0	459	0
Percentage of the number inspected affected with tuberculosis ...	0	0	.002	0	.78	0
Cysticercosis						
Carcases of which some part or organ was condemned ...	2	1	0	0	0	0
Carcases submitted to treatment by refrigeration ...	2	1	0	0	0	0
Generalised and totally condemned ...	0	0	0	0	0	0

Report on Rodent Control for 12 months ending 31st December, 1965

	Non-Agricultural				(5) Agricul- tural
	(1) Local Autho- rity	(2) Dwell- ing Houses	(3) All others (includ- ing Business Premises)	(4) Totals 1, 2 & 3	
I. Number of Properties in Local Authority's District	17	6,482	601	7,100	559
II. Number of Properties in- spected as a result of					
(a) Notification ...	9	192	19	220	9
(b) Surveys ...	8	201	49	258	82
(c) Otherwise ...	—	172	105	277	61
III. Total Inspections carried out — including re-inspect- tions ...	92	725	100	917	166
IV. Number of Properties in- spected which were found to be infested by					
(a) Rats { Major	—	1	—	1	—
Minor	15	283	34	332	30
(b) Mice { Major	—	1	2	3	—
Minor	—	20	6	26	—
V. Number of Infested Prop- erties treated by the L.A.	15	305	15	335	10
VI. Total Treatments carried out including re-treatments	34	342	15	391	10
VII. Number of Notices served under Section 4 of the Act.					
(a) Treatment ...	—	—	—	—	—
(b) Structural Work (i.e. Proofing)	—	—	—	—	—
VIII. Number of cases in which default action was taken following the issue of a Notice under Section 4 of the Act ...	—	—	—	—	—
IX. Legal Proceedings ...	—	—	—	—	—
X. Number of "Block Con- trol" schemes carried out	—	10	—	10	—

Rodent Control

Work under this heading is carried out in conjunction with the daily supervision of refuse collection and disposal and appears to operate very well indeed.

Refuse Collection

A report on the cost of introducing a weekly system of collection throughout the area was prepared and considered by the Council during the year. Owing to the extra cost involved it was decided that no alteration to the existing system should be made at present.

Refuse Disposal

Following on a paragraph in the Annual Report for 1963 dealing with the need for joint consultation when considering future refuse disposal needs, an invitation was sent to neighbouring authorities suggesting an exploratory meeting to be held at Taunton. Representatives from Wellington Urban, Wellington Rural, Taunton Borough and Taunton Rural Councils had a preliminary meeting and it appeared that the disposal problem was not an urgent matter for the two Wellington authorities. As far as Taunton Borough was concerned a problem would arise eventually but not for several years. The position as far as Taunton Rural was concerned was rapidly becoming critical, the tip in the parish of West Monkton having a useful life measured in months only. The closure of railway lines whilst proving to be a controversial national issue, proved to be a saving factor as far as the Council was concerned. Town and Country Planning permission was obtained to use a railway cutting on the closed Chard branch line between Greenway Bridge, Thornfalcon, and Bath Farm, West Hatch, for the disposal of refuse and negotiations for purchase from British Rail are now in progress.

Salvage Collection and Sales

The following items of salvage were disposed of during the year :

Material	T.	C.	Q.	lbs.	£	s.	d.
Newsprint	39	15	1	0	130	19	0
Cardboard	4	19	1	0	17	1	0
Magazines	11	18	1	0	38	9	10
Waste	5	5	1	0	16	17	8
Rags	2	7	3	0	23	17	6
Wools		5	2	5	17	17	4
Scrap Iron	2	12	1	0	15	13	6
Non-Ferrous Metal		12	3	15	35	19	0
Domestos Bottles	101	½ doz.			5	1	6
Meal Bags		6 cwt.			1	3	6
					<hr/> £302 19 10		

Factories Act, 1961

The inspection of factories and workshops in the district from a public health point of view is carried out by the staff of the Public Health Department. Routine visits are paid to the various premises and the following table gives particulars of this work.

Inspections for purposes of provisions as to health :—

Premises.	Number on Register	Number of		
		Inspections	Written notices	Occupiers Prosecuted
(i) Factories in which Section 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	8	0	0	0
(ii) Factories not included in (1) to which Section 7 applies	97	64	0	0
(iii) Other Premises under the Act (excluding out-workers' premises)	4	2	0	0
Total ...	109	66	0	0

